

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

#10/N. O. A 10-18-03 Will

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OCT 0 9 2003

Technology Center 2100

Group Art Unit:

2124

Examiner:

Malzahn, D.

Applicant:

Michael T. Moore et al.

Serial No:

09/605,503

Filing Date:

June 28, 2000

For:

METHOD OF IMPLEMENTING LOGIC FUNCTIONS USING A

LOOK-UP-TABLE

I hereby certify that this letter, the response or amendment attached hereto are being deposited with the United States Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on October 3, 2003.

NOTICE OF APPEAL

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

The Applicant of the above-captioned patent application hereby appeals to the Board of Patent Appeals and Interferences from the decision dated July 3, 2003 of the Examiner finally rejecting Claims 1-20.

The payment for the appeal fee is enclosed herewith.

10/08/2003 DTESSEN1 00000044 09605503

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330.00 OP

If Applicant has not requested a sufficient extension and/or has not paid a sufficient fee for this matter, and/or for the extension necessary to prevent the abandonment of this application, please consider this as a request for an extension for the required time period and/or authorization to charge our Deposit Account No. 50-0541 for any fee which may be due.

Respectfully submitted,

By:

Christopher P. Maiorana

Reg. No. 42\229

CHRISTOPHER P. MAIORANA, P.C.

24025 Greater Mack, Suite 200

St. Clair Shores, MI 48080

(586) 498-0670

Date: October 3, 2003

Attorney Docket No.: 0325.00364

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Attorney Docket: 0325.00364

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IN RE APPLICATION OF:

Michael T. Moore et al.

RESPONSE TRANSMITTAL AND EXTENSION OF TIME REQUEST

SERIAL NO.:

09/605,503

(IF REQUIRED)

TITLE:

METHOD OF IMPLEMENTING LOGIC FUNCTIONS USING A LOOK-UP-TABLE

FILED:

June 28, 2000

EXAMINER:

Malzahn, D.

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2124

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COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

OCT 0 9 2003

Technology Center 2100

Enclosed please find a notice of appeal and a postcard along with the fee calculation below:

FEE CALCULATION FOR ENCLOSED AND EXTENSION REQUEST (IF ANY)

	Claims Remaining	Highest No. Previous	Extra Rate	Additional Fee
Total Claims	20 minus	20 =	0 x \$ 18.00	\$ 0.00
Independent Claims	3 minus	3 =	0 x \$ 84.00	\$ 0.00

Multiple Dependent Claim First Added + \$280.00 \$ 0.00

TOTAL IF NOT SMALL ENTITY .. \$0.00

[] []	SMALL ENTITY STATUS - If applicable, divide by 2	. \$0.00
[]	Applicant also requests a month extension of time for response to the outstanding Office Action. The fee is	. \$ <u>0.00</u>
[X]	Fee set forth for Notice of Appeal	<u> 3330.00</u>
	TOTAL FEE	
The Co	e Commissioner is hereby authorized to charge any overpayment or underpayment of the mmunication to Deposit Account No. 50-0541. A duplicate copy of this sheet is attach	ed.

24025 Greater Mack, Suite 200 St. Clair Shores, Michigan 48080 (586) 498-0670 By:

Christopher P. Maiorana

Registration No.: 42,829

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By: Mary Donna Berkley